

04-04-01 A

**TRANSMITTAL OF
UTILITY
APPLICATION
UNDER 37
C.F.R. §1.53**

Attorney Docket No.	14731-500G
First named inventor	Micheal L. Gruenberg
Express mail label #	EL675147244US
Date of mailing	April 2, 2001

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Application Elements		Accompanying Application Papers
1. [X] Fee Transmittal Form		6. [X] Copy of assignment from prior application
2. [X] Specification containing <u>87</u> pages (including claims and Abstract)		7. [X] Small Entity Status is claimed
a. Title: AUTOLOGOUS IMMUNE CELL THERAPY: CELL COMPOSITIONS, METHODS AND APPLICATIONS TO TREATMENT OF HUMAN DISEASE		8. [] Preliminary Amendment
b. Number of claims: <u>101</u>		9. [X] Return Receipt Postcard
3. [] <u> </u> sheets of drawings with <u> </u> Figs.		
4. [X] Copy of Declaration filed in parent application.		
5. [] Sequence Listing		
[] Paper copy (identical to computer copy)		
[] Computer readable copy		
[] Verified statement		
		SIGNATURE OF ATTORNEY/AGENT
		HELLER EHRLMAN WHITE & McAULIFFE LLP
		Stephanie Seidman Registration Number: 33,779

[X] Divisional application of prior application No: 08/700,565, filed July 25, 1996, which claims the benefit of priority under 35 U.S.C. §119(e) to provisional application 60/044,693, filed on July 26, 1995.

CORRESPONDENCE ADDRESS

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**FEE TRANSMITTAL
ACCOMPANYING UTILITY
APPLICATION UNDER
37 C.F.R. §1.53**

Attorney Docket No.	1-500G
First named inventor	Micheal L. Gruenberg
Express mail label #	EL675147244US
Date of mailing	April 2, 2001

FEE CALCULATION FOR CLAIMS AS AMENDED

a)	Basic Fee	\$ 710.00
b)	Independent Claims <u>5</u> - 3 = <u>2</u> x \$ 80.00	\$ 160.00
c)	Total Claims <u>101</u> - 20 = <u>81</u> x \$ 18.00	\$ 1458.00
d)	Fee for Multiple Dependent Claims - \$260.00	\$ 0.00
	TOTAL FILING FEE	\$ 2328.00

[X] Status as Small Entity is claimed,
reducing Fee by one-half to \$1164.00

[X] A check in the amount of \$1164.00 to cover the fee for filing the application.

[] Charge \$.00 to Deposit Account No. 50-1213.

[X] The Commissioner is hereby authorized to charge any fees that may be required in this application under 37 C.F.R. §§ 1.16-1.17 during its entire pendency, or credit any overpayment, to Deposit Account No. 50-1213. If proper payment is not enclosed, such as a check in the wrong amount, unsigned, post-dated, otherwise improper or informal, or absent, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 50-1213 during the entire pendency of this application. This sheet is filed in duplicate.

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Submitted by:			
Typed or printed name	Stephanie Seidman	Reg. Number	33,779
Signature		Date	04/02/01
		Deposit Account	50-1213